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In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Friends For Porter Committee							
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
Tim Woodard	Make A Wish Foundation						
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	;
2528 Bloxom St	Postcards, Labels, Stamps		0 3	2 2	0 5		84.99
City	State Zip Code		Received at Fundraising Event?				
Grove City	O H 43123		☐ YES ✓ NO				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Diane Lazor	Kegler Brown						
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
2396 Lyncross St	postcards		0 3				22.05
City City	State H	Zip Code 43123	Receive	d at Fundi YES	raising E	ivent?	
Grove City Full Name of Contributor			Danistus	,	han if D		
	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Diane Lazor Street Address	Kegler Brown Description of Item or Service		M D Y Fair Market Value				
2396 Lyncross St	-	rtridge, envelopes		2 2			76.44
City	State	Zip Code		d at Fund			70.11
Grove City	O H	43123		YES		√N0	
Full Name of Contributor		ation, Labor Organization *	Registra	tion Num	ber, if P		
Greg Sours	Sales		`				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	;
2396 Lyncross St		Stamps	0 3	2 5	0 5		111.00
City	State	Zip Code	Receive	d at Fund	raising E		
Grove City	$O \mid H$	43123		YES		✓NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Jayme Moore	Kegler Brown		<u> </u>				
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
1632 Bryden Rd		Food		11			45.23
Columbus	State H	Zip Code 43205		d at Fund	raising E	NO	
Columbus Full Name of Contributor					hor if D		
Scott J. Varner	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	City of Columbus Description of Item or Service		M	D	Y	Fair Market Value	
1002 Hunter Ave.	Food		0 4				149.34
City	State	Zip Code		d at Fund			117.01
Columbus	\cap H	43201] YES	J	NO	
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registra	tion Num	ber, if P	AC	
			İ				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	e
1							
City	State	Zip Code	Receive	d at Fund	raising E		
			YES NO				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registra	tion Num	ber, if P	AC	
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	2
		In: O !	<u></u>			1	
City	State	Zip Code	Receive	d at Fund	raising E	_	
	<u> </u>	L		YES		NO	

Page Total \$ 489.05

^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupation rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]